

Appl. No. 10/032,603
Amdt. dated November 30, 2005
Reply to Office Action of September 22, 2005



Atty. Ref. 81800.0167
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yoshitaka NOSE et al.

Serial No. 10/032,603

Confirmation No. 8148

Filed: October 19, 2001

For: Paper Feeding Apparatus

Art Unit: 2622

Examiner: Lee, Cheukfan

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

November 30, 2005

Date of Deposit

Juanita Soberanis

Name

Juanita Soberanis 11/30/2005

Signature

Date

Dear Sir:

In response to the Office Action dated September 22, 2005, please amend this application as follows:

Amendments to the Specification begin on page 2 of this paper.

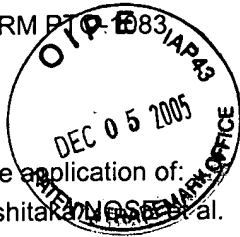
Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 7 of this paper.

TFW 2622

FORM PT-83

Attorney Docket No. 81800.0167
Customer No. 26021



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Yoshitaka Inoue et al.

Serial No: 10/032,603
Confirmation No: 8148
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Juanita Soberanis
Name
Juanita Soberanis 11/30/2005
Signature Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following:

- ☒ Amendment.
- ☒ Return postcard.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	6	-	20**	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	3	-	4***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS			\$ 0
Independent Claims: 15, 17 and 19							TOTAL \$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$___ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
 - ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
 - ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: November 30, 2005

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